

Please type a plus sign (+) inside this ☒

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

Attorney Docket No.

CDS-0215

First Named Inventor or Application Identifier

Randy Bower

Express Mail Label No.

EL327265662US

U.S. PTO
09/402599
01/13/00

01/13/00

Only for new nonprovisional applications under 37 CFR 1.53(b)

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (attached hereto in duplicate)

2. ☒ Specification [Total Pages 32]

(Preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☒ Drawing(s) (35 USC 113) [Total Sheets 7]

4. Oath or Declaration

- a. ☐ Newly executed (original or copy)
- b. ☐ Unexecuted original
- c. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional check boxes 5 and 16)
 - i. ☐ Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

5. ☐ Incorporation by Reference
(useable if Box 4c is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☐ Microfiche Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- 8. ☐ Assignment Papers (cover sheet & document(s))
- 9. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
- 10. ☐ English Translation Document (if applicable)
- 11. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- 12. ☐ Preliminary Amendment
- 13. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 14. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)

15. ☐ Other:

16. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Amend the specification by inserting before the first line: - This is a ☐ Continuation ☐ Divisional
☐ Continuation-in-Part (CIP) of prior application No.: , filed .

17. For this divisional application, please cancel original Claims of the prior application before calculating the filing fee.

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label or ☒ Correspondence Address below

Name: Audley A. Ciamporzero, Jr., Esq.

Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003 USA

19. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Todd F. Volyn at:

Telephone: (732) 524-6202 Fax: (732) 524-2808

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME: Todd F. Volyn Reg. No. 37463

SIGNATURE

Todd F. Volyn

DATE

January 13, 2000

FEE TRANSMITTAL	<i>Complete if Known</i>	
	Application Number	TBD
	Filing Date	January 13, 2000
	First Named Inventor	Randy Bower
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	CDS-0215

FEE CALCULATION

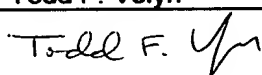
CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$760.00
TOTAL CLAIMS	17 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	6 - 3 =	3	x 78.00	\$ 234.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$260.00	
			TOTAL FEES	\$ 994.00

METHOD OF PAYMENT

☒ Please charge Deposit Account No. 10-0750/CD-0215/TFV in the amount of \$994.00.
Three copies of this sheet are enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CDS-0215/TFV. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>	
Typed or Printed Name	Todd F. Volyn		Reg. No. 37463
Signature		Date: 01/13/00	Deposit Account No. 10-0750